

Plan for handling receivership in accordance with IC 27-13-16-1.

In accordance with IC 27-13-16-1, all health maintenance organizations shall have a plan for handling receivership that allows for the continuation of benefits after the date of receivership for the longer of (1) The duration of the contract period for which premiums have been paid; or (2) Sixty (60) days.

IC 27-13-16-5 requires that IC 27-13-16-1 be met with one or more of the following alternatives:

- (1) Letters of guarantee from a parent company.
- (2) Conversion policies.
- (3) Insolvency insurance policies.
- (4) Additional deposits.

In order for the Department to maintain its records on an ongoing basis, please submit this form with each quarterly and annual financial statement.

Company Name

- A) The Company's estimate for 60 days of continued benefits.....
- B) Monetary limit of plan.....
- C) Subtract (A) from (B). This is the excess/(deficiency).....

If deficiency, please explain how the Company plans to comply and give a time-frame for such compliance.

Please check the appropriate area below that applies to the Company's plan.

(1) Letters of guarantee from a parent company

- a) Name of parent:
- b) Is the guarantee limited to a maximum amount? Yes No
- c) If yes, what is the maximum limit and how was it determined? \$
- d) Is a copy of the guarantee on file with the Department? Yes No If no, please submit with form.

(2) Conversion policies.

- a) Name of the affiliated party:
- b) Will the conversion policies offer the same premium rate and benefit package that is currently offered?
- c) If no, please explain.
- d) Is a copy of the conversion policy on file with the Department? Yes No If no, please submit with form.

(3) Insolvency insurance policies.

- a) Name of insurance carrier:
- b) Does the insolvency policy have a maximum limit amount? Yes No
- c) If yes, what is the maximum limit? \$
- d) What is the effective term of the insolvency policy?
- e) Is a copy of the insolvency policy on file with the Department? Yes No If no, please submit with form.
- f) If the reinsurer terminates the insolvency coverage, which of the other three alternatives would the Company utilize to maintain compliance?

(4) Additional Deposits

- a) Please explain.

Prepared by: Printed Name Signature
Date Telephone Number